

# PCEI/EAP Application Instructions

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1. **PCEI AmeriCorps Application:** Complete all items on the PCEI AmeriCorps Application
2. **Reference Form:** 1 Reference

References can be submitted directly by the recommender via email, fax or mail to the address listed below. ***Either way, it is ultimately the applicant's responsibility to ensure that all necessary references are received in a timely manner.***

References should be from people who know your skills, interests, and can describe how you, and the PCEI, could benefit from your participation. Examples included: a former work supervisor, teacher/professor or peer, *not family members or friends.*

## **Other things you should know:**

- Please remember that we cannot process any applications until all parts are complete and in our office.
- Applications are kept on file for one year.
- Please keep in mind that PCEI is a federally funded program. All of our partnerships and AmeriCorps placements are contingent upon receipt of this funding on an annual basis. If PCEI does not receive all or part of this federal funding, our program may be downsized or suspended.

### **Please Send Your Application to:**

Rachael Goetzelman  
Palouse-Clearwater Environmental Institute  
AmeriCorps Placement Program  
PO Box 8596  
Moscow, ID 83843  
p (208) 882.1444  
f (208) 882.8029  
rachael@pcei.org



AmeriCorps Placement Program  
Palouse-Clearwater Environmental Institute  
PO Box 8596 Moscow, ID 83843  
P: 208.882.1444  
[www.pcei.org/pcc](http://www.pcei.org/pcc)



## EDUCATION

10. Check the highest level of education that you will have completed by the time you are planning to serve in AmeriCorps. (Check only one.)

- Some high school                       Associate's degree                       Graduate degree  
 High school diploma or GED                       Some college                       Other (please specify): \_\_\_\_\_  
 Technical school/Apprenticeship                       Bachelor's degree                      \_\_\_\_\_

11. List all schools after high school that you have attended, including trade or technical schools, military training, and employment training programs.

Name of School (LIST MOST RECENT FIRST)	Location of School (CITY & STATE)	Dates Attended		Major Area of Study	Type of Degree or Certificate	Date Received/Expected
		From MO/YR	To MO/YR			

## COMMUNITY SERVICE

In the space below, describe how you have reached out to help others and/or how you have been involved in your own community. Elaborate on why you decided to help out or get involved, and what you received in return—that is, what you learned or how it made you feel. Think in broad terms. Your involvement could include serving in neighborhood, school, youth, religious, social, professional, or volunteer groups; helping out with community service projects; or participating in less formal activities, such as assisting an elderly neighbor.

12. How have you been involved in your community?

If you served in an organization, include the organization name, location, dates, and phone number. List your most recent activity first.

A. DATES OF INVOLVEMENT: From: \_\_\_\_\_ To: \_\_\_\_\_ HOURS PER MONTH: \_\_\_\_\_  
MONTH/YEAR                      MONTH/YEAR

Organization Name: \_\_\_\_\_ Location: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_  
AREA CODE



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# EMPLOYMENT

15. List and briefly describe the last four positions you have held. Begin with the current or most recent and go back ten years. Include self-employment, internships/fellowships, home management, and full-or part-time paid or unpaid work experience. *A résumé does not substitute for any items on your application.*

Name and Address of Employer	Dates	Job Title and Duties
A. Organization, city/state: _____  Supervisor and Phone: _____ _____ _____	From: ____ / ____ - MO./YR To : ____ / ____ MO./YR  Hours/week: ____	Title: _____  Duties: _____ _____ _____  Reason for leaving: _____ _____
B. Organization, city/state: _____  Supervisor and Phone: _____ _____ _____	From: ____ / ____ - MO./YR To : ____ / ____ MO./YR  Hours/week: ____	Title: _____  Duties: _____ _____ _____  Reason for leaving: _____ _____
C. Organization, city/state: _____  Supervisor and Phone: _____ _____ _____	From: ____ / ____ - MO./YR To : ____ / ____ MO./YR  Hours/week: ____	Title: _____  Duties: _____ _____ _____  Reason for leaving: _____ _____
D. Organization, city/state: _____  Supervisor and Phone: _____ _____ _____	From: ____ / ____ - MO./YR To : ____ / ____ MO./YR  Hours/week: ____	Title: _____  Duties: _____ _____ _____  Reason for leaving: _____ _____



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If you answered yes to any of the questions above, please provide the following information:

Date: \_\_\_\_\_ Place: \_\_\_\_\_  
MONTH/DAY/YEAR CITY STATE

Charge: \_\_\_\_\_ Action Taken: \_\_\_\_\_

Court, Probation, or Parole Officer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
NAME AREA CODE

Address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP CODE

*You may attach any additional information or explanation on a separate sheet.*

## **CERTIFICATION**

This form must be certified with your original signature in ink.

I certify that all of the statements made in my AmeriCorps application are true, correct, and complete, to the best of my knowledge, and are made in good faith. I understand that misinformation or omission of information could result in disqualification and/or termination as an AmeriCorps member.

I authorize the Palouse-Clearwater Center AmeriCorps program to investigate any information provided in my application, to check the references I have provided and to check with any other person who may have information relevant to my qualifications for positions at the Palouse-Clearwater Center. I realize that this information may be shared with potential partners.

I further authorize my current and past employers or anyone with information concerning my work history, education or qualifications to provide such information to the Palouse-Clearwater Center in response to inquiries. I agree to hold harmless from any claim of liability on my behalf anyone supplying such information to the Palouse-Clearwater Center.

Furthermore, I understand that if I am offered a position with the Palouse-Clearwater Center, such offer will be conditional upon receipt of a satisfactory report from the Idaho/Washington State Patrol and/or FBI criminal identification systems. I agree to allow an appropriate agency to obtain a set of my fingerprints for the purpose of conducting a report of criminal felony convictions within the past ten years, as well as any offenses against persons, civil adjudications of child abuse, and a disciplinary board's final decision.

PRIVACY ACT NOTICE: The Privacy Act of 1974 (5 U.S.C & 552a) requires that the following notice be provided to you: The authority for collecting information from you in this application is contained in 42 U.S.C 12592 and 12615 of the National and Community Service Act of 1990 as amended, and 42 U.S.C 4953 of the Domestic Volunteer Service Act of 1973 as amended. You are advised that submission of the information is entirely voluntary, but the requested information is required in order for you to participate in AmeriCorps programs.

\_\_\_\_\_  
PRINT NAME SIGNATURE DATE

**For Parent or Guardian of Applicants Under 18 Years of Age:** I have reviewed this application and I authorize my son/daughter/legal ward to apply to AmeriCorps.

\_\_\_\_\_  
SIGNATURE DATE

Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
FIRST LAST

Address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP CODE

Home Phone (\_\_\_\_) \_\_\_\_\_  
DATE



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## OPTIONAL INFORMATION

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This information will be used for statistical purposes and will not be used in the evaluation of your application. It will in no way affect your selection into AmeriCorps. Completion of this section is voluntary; failure to respond will in no way affect your candidacy.

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### HOW DID YOU HEAR ABOUT AMERICORPS? *You may check more than one.*

- |  |  |
|--|--|
| <input type="radio"/> AmeriCorps representative (service/career fair, conference, information session) | <input type="radio"/> College guidance office/Placement office |
| <input type="radio"/> Armed Forces   | <input type="radio"/> Department of Education                  |
| <input type="radio"/> Current or former AmeriCorps member  | <input type="radio"/> High school guidance counselor           |
| <input type="radio"/> Friend/Relative  | <input type="radio"/> Newspaper/Magazine article               |
| <input type="radio"/> Internet/Listserv/E-mail   | <input type="radio"/> Peace Corps                              |
| <input type="radio"/> Newspaper/Magazine advertisement   | <input type="radio"/> Radio advertisement                      |
| <input type="radio"/> Other service organization   | <input type="radio"/> Received information in the mail         |
| <input type="radio"/> Radio story  | <input type="radio"/> Television news story                    |
| <input type="radio"/> Television advertisement   | <input type="radio"/> Other (specify): _____                   |
| <input type="radio"/> Poster at school   |  |
- 

### WHAT IS YOUR ETHNICITY? Hispanic or Latino Not Hispanic or Latino

### WHAT IS YOUR RACE? *Mark one or more:*

- American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American.** A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.



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